

Official Form 22A (Chapter 7) (04/07)

In re L	aurence R Jordan, Jr.	
	Debtor(s)	According to the calculations required by this statement:
Case Number:(If known)		☐ The presumption arises.
		The presumption does not arise.
		(Check the how as directed in Parts III and VI of this statement)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY I NCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

primarily c	onsumer debts. Joint debtors may complete one sta	iteme	ent only.				
	Part I. EXCLUS	10	N FOR DISA	ABLED VETERA	NS	;	
If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in VIII. Do not complete any of the remaining parts of this statement.							
1	☐ Veteran's Declaration. By checking this box, 3741(1)) whose indebtedness occurred primarily du I was performing a homeland defense activity (as d	ıring	a period in which I v	vas on active duty (as def			
	Part II. CALCULATION OF MO	TN	HLY INCOM	1E FOR § 707(k	o) (7) EXCLU	SION
	Marital/filing status. Check the box that applies a	and c	complete the balance	e of this part of this stater	men	t as directed.	
	a. Unmarried. Complete only Column A ("	Debt	or's Income") for	Lines 3-11.			
2	 Married, not filing jointly, with declaration of "My spouse and I are legally separated under a purpose of evading the requirements of § 707 Lines 3-11. 	applio	cable non-bankrupto	y law or my spouse and I	are	living apart othe	r than for the
	c. Married, not filing jointly, without the decla ("Debtor's Income") and Column B ("Spo	use':	s Income") for Lin	es 3-11.		·	
	d. Married, filing jointly. Complete both Colu				Spor	use's Income")	for Lines 3-11.
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the					Column A	Column B
	filing. If the amount of monthly income varied during month total by six, and enter the result on the appropriate the result of the approximation of the same of t			nust divide the six-		Debtor's Income	Spouse's Income
3	3 Gross wages, salary, tips, bonuses, overtime, commissions.			\$	0.00	\$	
4	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.						
	a. Gross receipts	\$	Debtor 0.00	Spouse \$			
	b. Ordinary and necessary business expenses	\$	0.00				
	c. Business income	Su	btract Line b from Li	ne a	\$	0.00	\$
	Rents and other real property income. Subtract the appropriate column(s) of Line 5. Do not enter a part of the operating expenses entered on Line	a nun	nber less than zero.	Do not include any Part V.			
5	a. Gross receipts	\$	0.00	\$ Spouse			
	b. Ordinary and necessary operating expenses	\$	0.00				
	c. Rent and other real property income	Su	btract Line b from Li		\$	0.00	\$
6	6 Interest, dividends, and royalties.			\$	0.00	\$	
7	Pension and retirement income.			\$	0.00	\$	
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include amounts paid by the debtor's spouse if Column B is completed.			\$	0.00	\$	

9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:					3,				
		employment compensation claimed to a benefit under the Social Security Act	Debtor	\$	0.00	Spouse	e \$	<u> </u> \$	0.00	\$
10	Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount.									
10	a. Social Security Benefits b. Retirement Benefits			Debtor Spouse \$ 1.474.00 \$		Spouse				
				\$	1,474.0					
	Tota	al and enter on Line 10	I					\$	1,595.63	\$
11		btotal of Current Monthly Incom and, if Column B is completed, add Lines 3						\$	1,595.63	\$
12	A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.									1,595.6

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	19,147.56		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: TX b. Enter debtor's household size: 1	\$	34,418.00		
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.				
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of thi	s state	ment.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707	(b)(2)
16	Enter the amount from Line 12.	\$
17	Marital adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$

	Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)			
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)			
19	National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$		
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court).	\$		

20B							
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$				
	b.	Average Monthly Payment for any debts secured by your home,					
	C.	if any, as stated in Line 42 Net mortgage/rental expense	\$ Subtract Line b from Line a.	\$			
21	20A a Stand	al Standards: housing and utilities; adjustment. If yound 20B does not accurately compute the allowance to which you allards, enter any additional amount to which you contend you are easpace below:	re entitled under the IRS Housing and Utilities	\$			
22	□ 0 □ 1 □ 2 or more. Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable						
	number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)						
23	Enter www. Paym Line 2	☐ 2 or more. , in Line a below, the amount of the IRS Transportation Standards usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in ents for any debts secured by Vehicle 1, as stated in Line 42; subt 23. Do not enter an amount less than zero.	Line b the total of the Average Monthly ract Line b from Line a and enter the result in				
	a.	IRS Transportation Standards, Ownership Costs, First Car Average Monthly Payment for any debts secured by Vehicle 1,	\$				
	b.	as stated in Line 42	\$				
	C.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$			
24	Loca you c Enter www. Paym Line 2						
	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$				
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$				
	C.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$			
25	federa	or Necessary Expenses: taxes. Enter the total average mo al, state and local taxes, other than real estate and sales taxes, su security taxes, and Medicare taxes. Do not include real estate	ich as income taxes, self employment taxes,	\$			
26	Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.						
27	term	er Necessary Expenses: life insurance. Enter average n life insurance for yourself. Do not include premiums for insura ny other form of insurance.		\$			

28		ayments. Enter the total monthly amount that you are or child support payments. Do not include payments on	\$	
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			
30		he average monthly amount that you actually expend on reschool. Do not include other educational payments.	\$	
31		er the average monthly amount that you actually expend on account include accounts listed in Line 34.	\$	
32	actually pay for telecommunication services other than y	ernet service - to the extent necessary for your health and	\$	
33	Total Expenses Allowed under IRS Standard	s. Enter the total of Lines 19 through 32.	\$	
	·	Expense Deductions under § 707(b)	IΨ	
	·	•		
<u> </u>		enses that you have listed in Lines 19-32	T	
		Health Savings Account Expenses. List and total vourself, your spouse, or your dependents in the following		
34	a. Health Insurance	\$		
	b. Disability Insurance	\$		
	c. Health Savings Account	\$		
		Total: Add Lines a, b and c	\$	
35	expenses that you will continue to pay for the reasonable	ehold or family members. Enter the actual monthly and necessary care and support of an elderly, chronically ill, ir immediate family who is unable to pay for such expenses.	\$	
36	Protection against family violence. Enter any a maintain the safety of your family under the Family Viole law. The nature of these expenses is required to be kept	nce Prevention and Services Act or other applicable federal	\$	
37		nount, in excess of the allowance in the IRS Local Standards me energy costs. You must provide your case trustee onal amount claimed is reasonable and necessary.	\$	
38	Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$137.50 per child, in providing elementary and secondary education for your			
39	Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five			
40	Continued charitable contributions. Enter the cash or financial instruments to a charitable organization	amount that you will continue to contribute in the form of as defined in 26 U.S.C. § 170(c)(1)-(2).	\$	
41	Total Additional Expense Deductions under	§ 707(b). Enter the total of Lines 34 through 40	\$	
			•	

Subpart C: Deductions for Debt Payment							
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.						
	Name of Creditor	Property Securing the Debt	60-month Average Paymer	nt			
	a.		\$	⊒ .			
			Total: Add Line	s \$			
43	Other payments on secured cla a motor vehicle, or other property neces your deduction 1/60th of any amount (listed in Line 42, in order to maintain po that must be paid in order to avoid repo If necessary, list additional entries on a	sary for your support or the support he "cure amount") that you must pa ssession of the property. The cure ar ssession or foreclosure. List and tota	of your dependents, you may include in y the creditor in addition to the payment mount would include any sums in defact	in nts Ilt			
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amour	nt			
	a.		\$	- .			
			Total: Add Line				
44	Payments on priority claims. En alimony claims), divided by 60.	ter the total amount of all priority cla	ims (including priority child support an	nd \$			
	Chapter 13 administrative experion following chart, multiply the amount in I			se.			
	a. Projected average monthly Cha	pter 13 plan payment.	\$	<u> </u>			
45	issued by the Executive Office f	ict as determined under schedules or United States Trustees. (This					
	information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
c. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b \$							
46							
	Subpart D	: Total Deductions Allowe	d under § 707(b)(2)				
47	Total of all deductions allowed	under § 707(b)(2). Enter the t	otal of Lines 33, 41, and 46.	\$			

	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION	
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.	\$
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$

	Initial presumption determination. Check the applicable box and proceed as directed.				
	☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
52	☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55).				
53	Enter the amount of your total non-priority unsecured debt	\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$			
	Secondary presumption determination. Check the applicable box and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				

Part VII. ADDITIONAL EXPENSE CLAIMS Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. 56 Expense Description Monthly Amount a. b. c. c. s d. Total: Add Lines a, b, c, and d

Part VIII. VERIFICATION						
57	I declare under penalt must sign.) Date:	y of perjury that the inform	·	/s/ Laurence R Jordan, Jr. Laurence R Jordan, Jr. (Debtor)		